

The Olivieri debacle: where were the heroes of bioethics? A Reply

M Rowell

In her reply to Baylis the author takes the opportunity to "clarify, and in some cases to correct, some facts"

I am pleased to see Dr Baylis's article relating to the Olivieri case at the Hospital for Sick Children and the University of Toronto. I thank her for the many facets of that case that she has articulated. Nonetheless, as the bioethicist most closely connected with the case at the clinical level I would like to take this opportunity to clarify, and in some cases to correct, some facts.

Dr Baylis entitles her section on the role of bioethics as "Stories of silence". I differ from this view. Perhaps the stories are less stories of silence than stories to which others have not listened.

I wish to make it quite clear that I have always supported Dr Olivieri and her colleagues in their actions with respect to the research that is at the centre of this case. I have been public in my support and I continue to be so.

My departure from the Hospital for Sick Children was in no way caused by the Olivieri case. I was offered a challenging position at another Ontario hospital that fitted well with my professional goals and formed a part of a wider personal and positive discernment process. It may be the case that such a decision was made easier by the stresses and the sheer volume of work entailed in the Olivieri situation.

During my years as a bioethicist at the Hospital for Sick Children, and during this case, I always received the greatest support from Dr Christine Harrison, director of the Department of Bioethics. With respect to the Olivieri case my position was not "junior" to Christine Harrison's. Relations in the department were collegial and not hierarchical as Baylis presumes. My involvement as a bioethicist was agreed, mutually based on our relative strengths and backgrounds. My experience and record in research ethics made me the logical person to speak for the department on this issue within and outside the hospital.

My efforts to support Dr Olivieri were often dismissed by the hospital administration and sometimes also by the media, who were perhaps seeking a more sensational account of the case than I felt it appropriate to provide, believing such an approach to be contrary to the best interests of children in research and contrary to support of Dr Olivieri and her colleagues. In the hospital I actively argued strongly for Olivieri and there are letters to support this fact in the public archives of the Hospital for Sick Children. In particular, I requested that the Hospital initiate a truly independent review, a suggestion that was not accepted. On several occasions I spoke with news reporters who sought my opinion. In those interviews I consistently and without reservation, supported Dr Olivieri's position and I was critical of the hospital for its lack of support for Olivieri and her colleagues, and for what I saw as the hospital's misreading of the issues at hand in the case. I have always publicly supported the view that "given her interpretation of the data at the time Olivieri had no choice but to do what she did" (for the wellbeing and safety of children in research) (personal transcript of Dr M Shuchman in an interview on "Quirks and Quarks", CBC). I contributed in this vein to both the Naimark report and the report completed by the Canadian Association of University Teachers; the latter being a review that I believe to provide a public report of integrity.¹ In numerous cases I was not quoted despite my willingness to be so; a point of concern and disappointment to me.

In addition to the wider public support offered I spoke for Olivieri, and in a manner critical of the handling of the case by the hospital, at two meetings of the Canadian Bioethics Society, in numerous public presentations, and at

hospital and university rounds and lectures.

Perhaps Baylis is correct that I should have done more. What more I might have done, at that time, is unclear to me. In arguing, however, after the fact of another's actions, as Baylis does of mine, it is important to have the correct and clear facts.

Finally, it is important that readers of this article and this symposium understand that I retain respect for Nancy Olivieri as a professional. I honour the courage and the integrity of Dr Olivieri and of her close supporters, Drs Helen Chan, John Dick, Peter Durie, and Brenda Gallie. They have taught us much about research integrity and they continue to do so. Within recent weeks I have committed to continue to work with them whenever they need help with respect to other issues that have arisen as a consequence of the initial case. I am comfortable with a public articulation of my support.

Importantly too, my affection and respect for the Hospital for Sick Children remains strong. Every institution has its failings and its internal problems. My view is that in the Olivieri case and its sequelae the hospital publicly demonstrated such failings. What can be hoped for is that situations such as this teach us well how to proceed in the future. That said, the hospital's long standing and continuing record in almost every area of teaching, research, and most especially patient care, is exemplary. Readers considering this symposium should do so with this perspective in mind. I am proud to have been associated with the Hospital for Sick Children for a period of eight years and I am privileged to have worked with doctors of courage and integrity such as Dr Olivieri and her supporters, and indeed so many fine physicians who daily work with total commitment for children in need.

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REFERENCE

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